

**School Governor Service**

**New Governor Information Sheet**

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| --- | --- | --- | --- |
| **Surname:**  |       | **First Name:**  |       |

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| --- | --- | --- | --- |
| **Title** |       | **Date of Birth:** |       |

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| --- | --- | --- | --- |
| **Gender:** |       | **Ethnic Origin:** | Choose an item. |

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| --- | --- | --- | --- |
| **Do you consider yourself to have a disability:** | Choose an item. | **If ‘Yes’ please give details:** |       |

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| --- | --- | --- | --- |
| **Mobile:** |       | **Home Phone:** |       |

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| --- | --- | --- | --- |
| **Work Phone:**  |       | **Fax Number:** |       |

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| --- | --- |
| **E-Mail (1):** |       |

|  |  |
| --- | --- |
| **E-Mail (2):** |       |

|  |  |
| --- | --- |
| **Address:** |       |

|  |  |
| --- | --- |
| **Postcode:** |       |

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| --- | --- |
| **School/Academy where you are a governor:** |       |

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| **Type of governor:** | Choose an item. | **Appointment Date:** | Click here to enter a date. |

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| Completed by: |       | Date: |       |

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